

Please type a plus sign (+) inside this box

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)
OR

Attorney Docket Number	29191-707
First Named Inventor	HELLER, Jonathan, et al.
COMPLETE IF KNOWN	
Application Number	10/645,863
Filing Date	August 20, 2003
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM OF ANALYZING COMPLEX MIXTURES OF BIOLOGICAL AND OTHER FLUIDS TO IDENTIFY BIOLOGICAL STATE INFORMATION

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

8/20/2003

as United States Application Number or PCT International

Application Number **10/645,863** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/473,272	May 22, 2003	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 3)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

JAN 09 2004

Please Type a plus sign (+) inside this box

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 021971

OR

Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar
Code Label here

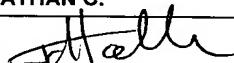
Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label Correspondence address below

Name	Anie K. Roche					
Address	Wilson Sonsini Goodrich & Rosati					
Address	650 Page Mill Road					
City	Palo Alto	State	CA	ZIP	94304	
Country	U.S.	Telephone	650-493-9300		Fax	650-493-6811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))				Family Name or Surname				
JONATHAN C.				HELLER				
Inventor's Signature							Date	11/17/03
Residence: City	San Francisco	State	California	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address								
City	San Francisco	State	California	ZIP		Country	USA	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:								

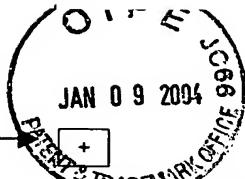
JAN 09 2004

Please Type a plus sign (+) inside this box

PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

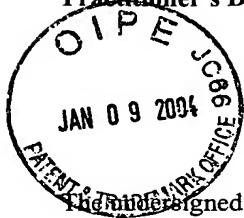
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>	
--------------------	--	--	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))		Family Name or Surname						
CAROL A.		DAHL						
Inventor's Signature							Date	11/17/03
Residence: City	Potomac	State	Maryland	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address								
City	Potomac	State	Maryland	ZIP	USA	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))		Family Name or Surname						
JOHN T.		STULTS						
Inventor's Signature							Date	11/17/03
City	Redwood City	State	California	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address								
City	Redwood City	State	California	ZIP		Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))		Family Name or Surname						
PETER		FOLEY						
Inventor's Signature							Date	11/17/03
City	Los Altos Hills	State	California	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address								
City	Los Altos Hills	State	California	ZIP		Country	USA	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.



POWER OF ATTORNEY BY ASSIGNEE TO EXCLUSION OF INVENTOR
UNDER 37 C.F.R. § 3.71 WITH REVOCATION OF PRIOR POWERS

The undersigned ASSIGNEE of the entire interest in:

U.S. Patent No. _____
 U.S. application no. 10645,863, filed on August 20, 2003

hereby appoints the following attorneys of Wilson Sonsini Goodrich & Rosati:

Attorney Name	Reg. No.	Attorney Name	Reg. No.
Vern Norviel	32,483	Scott Morris	43,818
James Shay	32,062	Maya Skubatch	52,505
Michael Barclay	32,553	Nicole Fortuné	52,905
Michael Murphy	37,404	Shirley Chen	44,608
U.P. Peter Eng	39,666	Julie Holloway	44,769
Kenta Suzue	45,145	Kevin Sin	43,110
George Willman	41,378	Michael Panepucci	37,203
Anie Roche	50,512		

and all Wilson Sonsini Goodrich & Rosati attorneys registered to practice before the United States Patent and Trademark Office, to prosecute this application and transact all business in the United States Patent and Trademark Office in connection therewith and hereby revokes all prior powers of attorney; said appointment to be to the exclusion of the inventors and the inventors' attorneys in accordance with the provisions of 37 C.F.R. § 3.71.

The following evidentiary documents establish a chain of title from the original owner to the Assignee:

(complete one of the following)

a copy of an Assignment attached hereto, which Assignment has been (or is herewith) forwarded to the Patent and Trademark Office for recording; or
 the Assignment recorded on ____ at reel ___, frames ____ - ____.

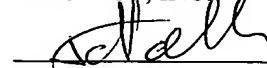
Pursuant to 37 C.F.R. § 3.73(b) the undersigned Assignee hereby states that evidentiary documents have been reviewed and hereby certifies that, to the best of ASSIGNEE's knowledge and belief, title is in the identified ASSIGNEE.

Direct all correspondence and telephone calls to:

Name	Vern Norviel					
Address	Wilson Sonsini Goodrich and Rosati					
Address	650 Page Mill Road					
City	Palo Alto	State	CA	Zip	94304	Customer No.: 021971
Country	USA	Telephone	(650) 493-9300	Fax	(650) 493-6811	

ASSIGNEE:

Name: JONATHAN C. Hause
 BIOSPECT, INC.



Signature

Title: VP Information + Project Management

Date: 11/26/03